PTO/SB/06 (08-03)
Approved for use through 7/31/2006, Okig 0631-0002
U.S. Patem and Trademank Odiou; U.S. OEPARTMENT OF COMMERCE
to a collection of information unless it displays a valid CMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 09-944977		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	C FEE FR 1.16(a))							3	OR		\$
101/	L CLAIMS	17	manus 20				x 6 •		OR.	X1 -	
(37 CFR 1.16(d) DODEPERDENT CLASMS		8 3							1		
(27 CFR 1.16(th))							× • •		OR	× 3	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(4))							<u></u>	<u> </u>	OR	-	
* if the difference in column 1 is less than zero, enter "V" in column 2.							TOTAL	L	OR	TOTAL	
CLAIMS AS AMENDED'- PART II											
G A A COTHER I											
_녹	-13-04	(Column 1)	1	(Column 2)	(Column 3)	ı	SMALL 6	NTITY	1	SMALL	ENTITY
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ENDMENT	Endependent GFR 1.Mpg	• 3	Minus	- 3			2.44.		l on	88.	^
¥		ATION OF HEATING	P OF PENOS	907 CLADA 02 CE	D 1.16600	l	150	-	OR	.200	
FIRST PRESENTATION OF MILETIPLE DEPENDENT CLAIM (SP CFR 1.14(4))						ļ	TOTAL		1	TOTAL	0
	11,17	~		•	,		ADO'L FEE	L	OR	ADO'L FEE	
コ	1810	(Cotumn 1)	,	(Cohemn 2)	(Column 3)				,		
¥	C (CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ŀ	RATE	ADOI- TIONAL FEE	·	RATE	ADDI- TIONAL - FEE
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긺	Independent (pr cirk 1.1800)	• 2	Minus	- 2	.0		x 8 •		OR.	× 5=	0
¥		ADON OF MILE TIPLE	e nepewne	PHT CLAIM 197 CI	TR 1.16(d)				OR		
FRET PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 GFR 1.18(4))						ŀ	TOTAL		1	TOTAL	
17	Jak						ADD'L FEE	L	OR	ADD'L FEE	
16) (2/0	(Calumn 1)		(Column 2)	(Cohumn 3)				-		
N	-	CLAIMS REMARKING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE	ŀ	RATE	ADOI- TIONAL FEE
ME	Total car offic 1.16(a)	. 7	Minus	-30	· /	1	× 8 •		l on	x s=	<u> </u>
AMENDMENT	Independent grown Lines	1· /	Minus	- 3	1-	ľ		 	1		
¥			لــــا				× 8		OR	× •	
FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))							TOTAL		OR	TOTAL	 -
							ADO'L FEE		OR	ADD'L FEE	L
* If the entry in column 1 is tess then the entry in column 2, write "of in column 3." "If the "Replact Number Proviously Paid For" IN THIS SPACE is less than 26, enter "20". "If the "Replact Number Proviously Paid For" IN THIS SPACE is less than 2, enter "3".											

"If the "Highest Number Previously Paid For" (Total or Independent) is the Highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain is benefit by the public which is to like (and by the USPTO to process) an explication. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and automating the completed application form to the USPTO. There will very depending upon the Individual case. Any comments on the execution of time you require to complete this form and/for suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option ${\bf 2}$